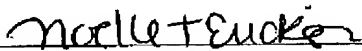



CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No. 122667/GEM-0038	
Applicant(s): ABDELAZIZ IKHLEF			
Application No. 10/064,590	Filing Date 7/29/2002	Examiner CHRISTINE SUNG	Group Art Unit 2878
Invention: SCINTILLATOR GEOMETRY FOR ENHANCED RADIATION DETECTION AND REDUCED ERROR SENSITIVITY			
RECEIVED CENTRAL FAX CENTER SEP 22 2004			
I hereby certify that this <u>AMENDMENT TRANSMITTAL (1) PAGE AND AMENDMENT (14) PAGES</u> <small>(Identify type of correspondence)</small> is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>SEPTEMBER 22, 2004</u> <small>(Date)</small>			
<u>Noelle T. Erickson</u> <small>(Typed or Printed Name of Person Signing Certificate)</small> <u></u> <small>(Signature)</small>			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 122667/GEM-0038	
Applicant(s): ABDELAZIZ IKHLEF					
Application No. 10/064,590	Filing Date 7/29/2002	Examiner CHRISTINE SUNG	Customer No. 23413	Group Art Unit 2878	Confirmation No. 5121
Invention: SCINTILLATOR GEOMETRY FOR ENHANCED RADIATION DETECTION AND REDUCED ERROR SENSITIVITY					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	26 -	25 =	1 x	\$18.00	\$18.00
INDEP. CLAIMS	4 -	4 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$18.00
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 07-0845 in the amount of \$18.00 <input type="checkbox"/> A check in the amount of to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 07-0845 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.18. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: September 22, 2004		
Troy J. LaMontagne Registration No. 47,239 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Customer No. 23413			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)		
			Signature of Person Mailing Correspondence		
			Typed or Printed Name of Person Mailing Correspondence		
CC:					

P11LARGE/REV08

SEP 22 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Abdelaziz Ikhlef)
) Group Art Unit: 2878
SERIAL NO.: 10/064,590)
) Examiner: C. Sung
FILED: July 29, 2002)
) Confirmation No. 5121
FOR: SCINTILLATOR GEOMETRY FOR ENHANCED)
RADIATION DETECTION AND REDUCED ERROR)
SENSITIVITY)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO OFFICE ACTION

In response to the Office Action mailed June 23, 2004 in regard to the above Patent Application, Applicants request reconsideration of the claims in view of the following amendments and remarks.